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NO. 9764 P. 3/9

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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL For FY 2005		<i>Effective on 12/08/2004. Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).</i>	
		Complete if Known	
		Application Number	10/563198
		Filing Date	January 3, 2006
		First Named Inventor	Toshio Hihara
Examiner Name	Not Yet Assigned		
Art Unit	N/A		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$) 130.00		
	Attorney Docket No. 05579-00350-US		

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 03-2775		Deposit Account Name:	Connolly Bove Lodge & Hutz LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues) 50 25							
Each independent claim over 3 (including Reissues) 200 100							
Multiple dependent claims 360 180							
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
- 20 =	x	=	_____	Fee (\$)	Fee Paid (\$)	_____	
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____			
- 3 =	x	=	_____	_____			
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50	(round up to a whole number) x		=	_____	Fee Paid (\$)	
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount) 130.00							
Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration							

SUBMITTED BY	
Signature	
Name (Print/Type)	Ashley I. Pezzner
Registration No. (Attorney/Agent)	35,648
Telephone	(302) 658-9141
Date	January 23, 2006

Page 1 of 14

FAX*Urgent and Confidential*

Date: January 23, 2006

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TO: USPTO
Examiner Ming Chow
Art Unit 2645
Fax Number 571-273-8300

FROM: Alan Pedersen-Giles
Fax Number 703-633-3303
Phone Number 703-633-1061

SUBJECT: Application Number 10/038,917
Inventor(s) James M. Coleman
Date Filed January 3, 2002
Docket Number 42.P12313
Title Property Management System Protocol Auto-Detection

INCLUDED IN THIS TRANSMISSION:

Fax Cover Sheet	1 page
Transmittal	1 page
Petition for Extension of Time	1 page
Amendment	11 pages

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Mail Stop: Commissioner for Patents, PO BOX 1450, Alexandria, VA 22313-1450 on January 23, 2006.

Alan Pedersen-Giles

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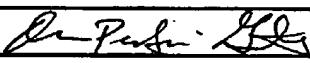
Total Number of Pages In This Submission

Application Number	10/038,917
Filing Date	January 3, 2002
First Named Inventor	James M. Coleman
Art Unit	2645
Examiner Name	Ming Chow
Total Number of Pages In This Submission	14
Attorney Docket Number	42.P12313

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Fax cover sheet
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

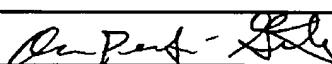
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Intel Americas		
Signature			
Printed name	Alan Pedersen-Giles		
Date	January 23, 2006	Reg. No.	39,996

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Alan Pedersen-Giles

Date January 23, 2006

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